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NOTICE OF FILING / CLAIM FEE(S) DUE
(CALCULATION SHEET)

APPLICATION NUMBER: 09/518766

Total Fee Calculation

| Fee Code | Total # Claims | Number Extra X | Fee | Fee = Total | |
|-------------------------------------|-------------------|----------------------|-----|-------------|-------------------------|
| | | | | Sm. Entity | Lg. Entity |
| Basic Filing Fee | <u>201/101</u> | | | | <u>690</u> - <u>690</u> |
| Total Claims >20 | <u>203/103</u> | -20 = | X | | |
| Independent Claims >3 | <u>202/102</u> | -3 = | X | | |
| Mult. Dep. Claim Present | <u>204/104</u> | | | | |
| Surcharge | <u>205/105</u> | | | | |
| English Translation | <u>139</u> | | | | |
| <u>TOTAL FEE CALCULATION</u> | | | | | <u>820</u> |

Fees due upon filing the application:

Total Filing Fees Due = \$ 820.00

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 820.00

Stacy Dale
Office of Initial Patent Examination

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